



T-H  
10-29-03  
#111

Declarator

REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (optional)  
099488-2

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,810,590, granted September 22, 1998, and for which a reissue patent is sought on the invention entitled Dental Implants and Methods for Extending Service Life, the specification of which

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☐ is attached hereto.

☒ was filed on September 22, 2000 as reissue application number 09/667,827 and was amended on September 22, 2000, July 9, 2001, May 1, 2003.

(If applicable)

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I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening: Failure to broadly claim the "boss" as set forth in claim 15 as:

A dental implant for insertion in the jaw bone of a patient, comprising:

an elongated body having a longitudinal axis and proximal surface generally transverse to said longitudinal axis,

a boss extending from said proximal surface, said boss having a transverse face and generally axial extended side surfaces,

at least one indentation penetrating said transverse face of said boss and said proximal surface of said body, said at least one indentation being adapted to engage an insertion device or at least one protrusion of a dental prosthesis or abutment so as to fix the position of the abutment or crown relative to said implant.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)		Docket Number (optional) 099488-2	
<p>All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.</p> <p>I/We hereby appoint:</p> <p>Practitioners at Customer Number <b>22204</b> as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.</p> <p>Correspondence Address: Direct all communications about the application to:</p> <div style="display: flex; align-items: center; margin-top: 10px;"> <div style="margin-right: 10px;"> <input checked="" type="checkbox"/> Customer Number         </div> <div style="border: 1px solid black; padding: 5px; text-align: center; margin-right: 10px;"> <b>22204</b>  <i>Type Customer Number here</i> </div> <div style="margin-right: 10px;">→</div> <div style="border: 1px solid black; padding: 5px; text-align: center; flex-grow: 1;"> <i>Place Customer Number Bar Code Label here</i> </div> </div>			
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City		State	
Country			
Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.</p>			
Full name of sole or first inventor (given name, family name) <b>PAULA S. FRIED</b>			
Inventor's signature		Date	
Residence <b>207-20 Jordan Drive, Bayside, NY 11360</b>		Citizenship <b>U.S.</b>	
Mailing Address <b>207-20 JORDAN DRIVE, BAYSIDE, NY 11360</b>			
Full name of second joint inventor (given name, family name) <b>LEONARD COOPER</b>			
Inventor's signature		Date	
Residence <b>999 Grant Ave., Pelham Manor, NY 10803</b>		Citizenship <b>U.S.</b>	
Mailing Address <b>999 Grant Ave., Pelham Manor, NY 10803</b>			
Full name of third joint inventor (given name, family name)			
Inventor's signature		Date	
Residence		Citizenship	
Mailing Address			
<input type="checkbox"/> Additional joint inventors are named on separately numbered sheets attached hereto.			



<b>REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT</b>		Docket Number (Optional) 099488-2
<p>This is part of the application for a reissue patent based on the original patent identified below.</p>		
Name of Patentee(s) <b>Paula S. Fried and Leonard Cooper</b>		
Patent Number <b>5,810,590</b>	Date Patent Issued <b>September 22, 1998</b>	
Title of Invention <b>DENTAL IMPLANTS AND METHODS FOR EXTENDING SERVICE LIFE</b>		
<p>1. <input checked="" type="checkbox"/> Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.</p> <p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".</p> <p>The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>		
<p>The assignee(s) owning an undivided interest in said original patent is/are <b>Paula S. Fried</b>, and the assignee(s) consents to the accompanying application for reissue.</p>		
Name of assignee/inventor (if not assigned) <b>Paula S. Fried</b>		<b>RECEIVED</b> <b>OCT 28 2003</b>
Signature	Date	<b>TECHNOLOGY CENTER #3700</b>
Type or printed name and title of person for assignee (if assigned) <b>Paula S. Fried</b>		



**STATEMENT UNDER 37 CFR 3.73(b)**

Applicant/Patent Owner: **Paula S. Fried and Leonard Cooper**

Application No./Patent No.: **5,810,590** Filed/Issue Date: **September 22, 1998**

Entitled: **DENTAL IMPLANTS AND METHODS FOR EXTENDING SERVICE LIFE**

**Paula S. Fried**

(Name of Assignee)

, a **Individual**

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by, percentage) of its ownership interest is \_\_\_\_\_%

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel **011458**, Frame **0629** \_\_, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (*i.e.*, the original assignment document or true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

\_\_\_\_\_  
Date

**Paula S. Fried**

\_\_\_\_\_  
Typed or printed name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

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**OCT 28 2003**

**TECHNOLOGY CENTER R3700**

## REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (optional)  
099488-2

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My residence, mailing address and citizenship are stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,810,590, granted September 22, 1998, and for which a reissue patent is sought on the invention entitled Dental Implants and Methods for Extending Service Life, the specification of which

- ☐ is attached hereto.  
☒ was filed on September 22, 2000 as reissue application number 09/667,827  
and was amended on September 22, 2000, July 9, 2001, May 1, 2003.  
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(Check all boxes that apply.)

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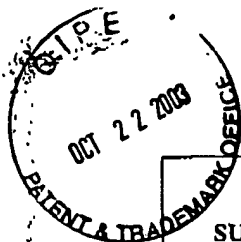
at least one indentation penetrating said transverse face of said boss and said proximal surface of said body, said at least one indentation being adapted to engage an insertion device or at least one protrusion of a dental prosthesis or abutment so as to fix the position of the abutment or crown relative to said implant.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)		Docket Number (optional)	
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I/We hereby appoint:			
Practitioners at Customer Number 22204 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.			
Correspondence Address: Direct all communications about the application to:			
<input checked="" type="checkbox"/> Customer Number	22204 Type Customer Number here	Place Customer Number Bar Code Label here	
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.			
Full name of sole or first inventor (given name, family name)			
PAULA S. FRIED			
Inventor's signature		Date	
Residence 207-20 Jordan Drive, Bayside, NY 11360		Citizenship U.S.	
Mailing Address 207-20 JORDAN DRIVE, BAYSIDE, NY 11360			
Full name of second joint inventor (given name, family name)			
LEONARD COOPER			
Inventor's signature <i>Leonard Cooper</i>		Date <i>Oct 21, 2003</i>	
Residence 999 Grant Ave., Pelham Manor, NY 10803		Citizenship U.S.	
Mailing Address 999 Grant Ave., Pelham Manor, NY 10803			
Full name of third joint inventor (given name, family name)			
Inventor's signature		Date	
Residence		Citizenship	
Mailing Address			
<input type="checkbox"/> Additional joint inventors are named on separately numbered sheets attached hereto.			



**SUPPLEMENTAL DECLARATION  
FOR REISSUE  
PATENT APPLICATION  
TO CORRECT "ERRORS" STATEMENT  
(37 CFR 1.175)**

Attorney Docket Number	099488-2
First Named Inventor	Paula S. Fried
<b>COMPLETE</b>	
Application Number	09/667,827
Filing Date	September 22, 2000
Group Art Unit	3732
Examiner Name	Cary E. O'Connor

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I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issues thereon.

<b>Name of Sole or First Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
PAULA S.		FRIED	
Inventor's Signature		Date	
<b>Name of Second Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
LEONARD		COOPER	
Inventor's Signature	<i>Leonard Cooper</i>	Date	10/21/2003
<b>Name of Third Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
<b>Name of Fourth Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	

☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.